

# Please sponsor me



children's hospice  
SOUTH WEST

Title:

Full first name:

Surname:

Home address:

Postcode:

Tel no:

Email:

Team name:

☐ My employer offers a matched giving scheme to match the amount I raise

Your employer's name:

We take your privacy seriously. For full details about how we store, protect, share and use your personal data, please see our Privacy Policy [www.chsw.org.uk/privacy](http://www.chsw.org.uk/privacy)

Thank you for your sponsorship, if you would prefer not to receive an acknowledgement, please tick here ☐



Friday 15 to  
Sunday 17 May 2026

I pledge to raise

£ .....

to help short and precious  
lives across the South West



Registered with  
**FUNDRAISING  
REGULATOR**

*giftaid it*

**Full name + home address + postcode + ✓ = Gift Aid**

If I have ticked the box headed 'Gift Aid' ☒ I confirm that I am a UK Income or Capital Gains taxpayer. I have read this statement and want Children's Hospice South West to reclaim tax on the donations detailed below, given on the date shown. I understand that if I pay less Income Tax/or Capital Gains tax in the current tax year than the amount of Gift Aid claimed on all of my donations it is my responsibility to pay any difference. I understand that the charity will reclaim 25p of tax on every £1 that I have given.

Full Name (First name and surname)	Home Address Not your work address (this is essential for Gift Aid)	Postcode	£s Pledged	£s Received	Date Given	Gift Aid
Mr John Smith	37 Lavender Close, Brighton, East Sussex	BNI 3SR	£20	£20	14/01/2026	✓



Making the most of short and precious lives across the South West  
[www.chsw.org.uk](http://www.chsw.org.uk)

Registered Charity No. 1003314



# Please sponsor me

Incredible Hike continuation sheet



giftaid it

**Full name + home address + postcode + ✓ = Gift Aid**

If I have ticked the box headed 'Gift Aid' ☒ I confirm that I am a UK Income or Capital Gains taxpayer. I have read this statement and want Children's Hospice South West to reclaim tax on the donations detailed below, given on the date shown. I understand that if I pay less Income Tax/or Capital Gains tax in the current tax year than the amount of Gift Aid claimed on all of my donations it is my responsibility to pay any difference. I understand that the charity will reclaim 25p of tax on every £1 that I have given.

Full Name (First name and surname)	Home Address Not your work address (this is essential for Gift Aid)	Postcode	£s Pledged	£s Received	Date Given	Gift Aid
Mr John Smith	37 Lavender Close, Brighton, East Sussex	BN1 3SR	£20	£20	14/01/2026	✓

**Return your sponsor money using an option below and complete the details to the right:**

- ☺ Return your sponsor forms and cash or cheque, made payable to 'Children's Hospice South West,' to your local hospice or the head office (please do not send cash or coins in the post):  
Little Bridge House (head office), Redlands Road, Fremington, Barnstaple, Devon EX31 2PZ  
Charlton Farm, Charlton Drive, Wraxall, North Somerset BS48 1PE  
Little Harbour, Porthpean Road, Porthpean, St Austell, Cornwall PL26 6AZ
- ☺ Visit [www.chsw.org.uk/donate](http://www.chsw.org.uk/donate) and use our online form. Please remember to post your sponsor forms to us so if your sponsors have ticked the Gift Aid box we will be able to claim an extra 25p for every £1 you raise!

Date paid/sent:

Amount paid/sent: £

Please indicate how you paid

☐ Post    ☐ CHSW website

☐ Local hospice